



Jim Doyle  
Governor

Helene Nelson  
Secretary

**State of Wisconsin**

**Department of Health and Family Services**

**DIVISION OF DISABILITY AND ELDER SERVICES**

1 WEST WILSON STREET  
P O BOX 7851  
MADISON WI 53707-7851

Telephone: (608) 266-2000  
FAX: (608) 266-2579  
TTY: (608) 266-7376  
dhfs.wisconsin.gov

**DATE:** March 7, 2006

**TO:** Aging and Disability Resource Center Directors

**FROM:** Judith Frye, Associate Administrator, Division of Disability and Elder Services  
Donna McDowell, Director, Bureau of Aging and Disability Resources

**RE:** Grant Funds for Prevention Projects Based in Family Care Resource Centers

Since 1999, the Department of Health and Family Services has set aside Family Care funding specifically for prevention projects in Aging and Disability Resource Centers (ADRC). Since the initial application opportunity, thirteen projects have been funded. The thirteen projects have demonstrated strategies to prevent disabilities, improve upon or maintain health status and lessen the need for formal long term care. Some of the previous projects have been pilots in conducting research to discover effective health interventions; others have replicated or designed prevention programs that are based in existing research. All have established service programs in recognition that prevention matters to older people and those with disabilities.

The overall goal for funding of the upcoming projects is to afford consumers broader access to community-based prevention programs. Thus, through a discretionary and competitive process the Division of Disability and Elder Services will fund prevention projects beginning on May 1, 2006 through December 31, 2007. Each of the seventeen Aging and Disability Resource Centers is invited to apply for funding. In order to qualify, the ADRC will partner with at least one additional county, with experienced counties mentoring counties that are less experienced in establishing effective prevention programs for older adults and people with disabilities. The project design should be evidence-based, involve extensive community partnerships and utilize volunteers.

The total funding that is available is \$1,579,150. At least sixty percent, or \$947,490 is reserved for supporting proposals in fall prevention. Up to forty percent, or \$631,660 will be granted to other types of prevention and intervention strategies that reduce the need for long-term care as well as emergency and acute medical care. The sixty/forty percentage split for the activity type may ultimately change, depending upon the mix of proposals that are submitted. Proposals should be designed and budgeted over a two-year period. Year one is expected to begin May 1, 2006 and end on December 31, 2006. Year two funds will be released on January 1, 2007 for the period through December 31, 2007.

The minimum amount of an award will be \$50,000 per year. All available funds will be allocated.

Successful ADRC prevention proposals should demonstrate consideration of and understanding in the following topic areas:

- Focuses on activity within the community and/or is home-based;
- Identifies a chronic condition(s) and/or behavior(s) that increase a person's risk of hospitalization, disability, or institutionalization, such as:
  - Falls and injuries
  - Urinary incontinence
  - Osteoporosis
  - Skin breakdown
  - Family caregiving
  - Misuse of medications
  - Violence and disabilities
  - Arthritis
  - Tobacco product use
  - Alcohol and other substance abuse
  - Nutrition and disabilities
  - Depression and suicide
  - Dental caries and oral diseases
  - Influenza and pneumococcal diseases
  - Diabetes
  - Lung disease
  - Cancer
  - Sensory loss
  - Social isolation
  - Physical inactivity
  - Obesity
- Investigates and presents research literature to identify effective evidence-based prevention strategies;
- Details intervention strategies that are supported in research; and
- Devotes staff time and resources necessary to assure completion and success of the project.

**Special Notes:** This is not a request for proposals for research and demonstration projects. Proposals must show knowledge of and the capacity to implement an already existing evidence-based activity that identifies risk and acts to prevent, manage or slow a decline in health status. A proposal that identifies a powerful risk factor or a population at risk without an effective intervention strategy will not be funded.

By the start of year two, grantees are required to provide the necessary technical assistance or resource to achieve an operational program in the county(ies) that have been identified in their proposals. Explain how funds or personnel will be shared. County partnerships do not have to be geographically contiguous. In the spirit of expanding opportunity, partnerships with a county or counties currently without an ADRC is encouraged for consideration but is not required.

Proposals should include details about recruitment, support and utilization of volunteers. Informal or unpaid caregivers, including family members may be considered volunteers. Volunteers can be a powerful source of peer support, boost the capacity of the number of individuals served and enhance the coordination of services necessary to support the prevention effort.

Applicants must demonstrate a collaborative process in the development and implementation of the prevention project such as:

- Inviting city or county public health department staff to participate in project planning and project implementation. Consider the most recent public health community assessments and priorities and how they apply to this project;
- Identifying local educators, social and health care experts, and involving them in the design and implementation of the project;
- Communicating with your local health care partners about your program and how it can enhance and support consumer health; and
- Engaging support staff, i.e., homecare staff, care management entities and family caregivers so they can compliment ongoing prevention efforts.

Effective prevention programming is a highly collaborative activity, and these funds are an opportunity to engage and strengthen relationships with public health, primary health care systems and clinicians, care management entities and community-based program partners in order to achieve an optimum level of support and coordination for consumers. Funds may be subcontracted to community and/or county government partners.

#### Allowable Use of Funds

The Resource Center will be responsible for all prevention project activity if the prevention project is funded. It is expected, though not required, that in working with entities and staff of an additional county or counties, ADRC's will contract with them to implement the project. The proposed contracted county agency/agencies must be identified in the application.

Funds may be used for staff, project equipment, training, space and supplies necessary to conduct the project. Funds may also be used for specific consumer service needs identified through the project when no other payment source is available. The prevention funds may not supplant existing health and social service funds allocated by the county. Funds may not be used to purchase or remodel buildings.

#### **Application**

If you would like to apply for Family Care Resource Center Prevention funds please provide the information requested in the attached document and budget forms. **Application is limited to 25 pages or less, inclusive of forms and letters of support.** Return an original and six copies of the completed application to Tracy Ellingson, Bureau of Aging and Disability Resources, P. O. Box 7851, Madison, WI 53707-7851. Materials must be **received by 4:00p.m. on Tuesday April 11, 2006.** Fax copies will not be accepted. Electronic submissions, via email will be accepted and should you wish to do so, send to Ms. Ellingson at [ellintl@dhfs.state.wi.us](mailto:ellintl@dhfs.state.wi.us) Her telephone number is (608) 266-2036 if you have questions.

**Application Specifications:** Applicants must meet these specifications to be considered for review. Applications are to be typed on 8 ½ by 11 inch plain white paper. The narrative is to be double-spaced with 1-inch margins on all sides using a font no smaller than 12 pt. All pages should be numbered sequentially; limit application to 25 pages, inclusive of budget and letters of support.

**Award Procedures:** An evaluation committee will tabulate scores and applicants will be ranked according to the numerical score received. All materials will then be presented to Division Managers for a final decision regarding awards. The Division of Disability and Elder Services reserves the right to reject any applications and to negotiate the award amount, authorized budget items and specific programmatic goals with the selected applicants prior to entering into a contract. The Department of Health and Family Services will award funds through an amendment to the Family Care Resource Center contracts. Announcement of projects selected for funding is anticipated in April 2006.

**Appeal Process:** Applicants can only appeal or protest a violation of the procedures outlined in this application. An appeal cannot be made on the interpretations or judgments of the reviewers or on the merit of the proposal. If an appeal is filed, new material to the original application is not admissible. A written protest or appeal is to be filed with the Administrator of the Division of Disability and Elder Services, Room 850, P.O. Box 7850, Madison, WI 53707-7850 on or before April 28, 2006. Include in the letter, the procedure being contested.

The decision of the Division of Disability and Elder Services may be further appealed to the Secretary of the Department of Health and Family Services, Rm 650, P.O. Box 7850, Madison, WI 53707-7850. This must be in writing and completed within five (5) working days of issuance, with a copy filed with the Division of Disability and Elder Services.

## **Wisconsin Aging and/or Disability Resource Center**

### **Prevention Funding Application 2006-2007**

Please provide the following information in your request for prevention funding for the May 2006 through December 2007 period. Refer and adhere to the best extent possible the guidance iterated in the accompanied cover letter announcing fund availability and processes. The application is not to exceed 25 pages.

**1. County and Resource Center:** name, address, e-mail, phone number and fax.

**2. Contact:** name and phone number of primary contact person.

**3. Target Group(s):** to be served through the Resource Center prevention project.

**4. Project Summary:** maximum fifty words to summarize the project.

**5. Purpose and Need for Assistance (total points 10):** describe key program issues relevant to the purpose of select intervention(s). Include review of literature and needs assessment to document relevance of described prevention project.

**6. Organizational Capacity (total points 35):** identify partners and describe how a coordinated and collaborative approach has been used to develop and implement the prevention proposal. Identify author(s) of the application and organizational capacity of key partners. Letters of support may be included at the end of the application.

**7. Project Narrative (total points 40):**

A. Approach or Methods - respond to each of the items below:

- Identify how the prevention project will ameliorate the target group's risk of institutionalization, loss of function and/or increased disability.
- Describe the methods to be used for screening and identifying adults at high risk.
- Describe the project design and include procedures for providing technical and operational assistance to the county or counties identified as partners in your proposal.
- Describe measurements and/or data to be collected. Plans should include a projected number of persons to be served and data collection plans will use simple measure of results, e.g., how many participants were hospitalized or entered a nursing home? Did the programs follow the protocols of the prevention design?

## Prevention Funding Application 2006-2007 (continued)

B. Plan and Timeline - Demonstrate an organized plan, leading to and showing ready ability to engage at least one additional county partner in the prevention project. It is expected that the work in year two will reach and provide service to additional consumers. Include specific goals, and objectives, including a timeline for the entire project.

**8. Project Budget (total points 15):** complete Budget Request sheets for Year I and Year II.

- Provide a separate narrative listing each staff position and credentials with description of major activities to be performed and the percent of time to be spent on these.
- If the entire project is subcontracted, the contract agency should complete the budget.

The following list of websites may be helpful references for information on evidence-based, community-focused prevention programs and design:

The National Institute on Aging  
<http://www.nia.nih.gov/>

Center for Excellence for Fall Prevention  
[www.stopfalls.org](http://www.stopfalls.org)

NIH Office of Behavioral and Social Science Research (OBSSR)  
<http://www1.od.nih.gov/behaviorchange/index.htm>

Center for Healthy Aging  
[www.healthyagingprograms.org](http://www.healthyagingprograms.org)

NIH CRISP Database  
The Centers for Disease Control and Prevention (CDC)  
<http://www.cdc.gov/aging>

HEROES Program, Temple University  
Health, Education Research and  
Outreach for Seniors  
[www.temple.edu](http://www.temple.edu)

The Agency for Health Research and Quality (AHRO)  
<http://www.ahrq.gov/clinic/epcquick.htm>

American Geriatrics Society (Also includes guidelines in Fall Prevention)  
<http://www.americangeriatrics.org/>

University of Washington Health Promotion Research Center  
<http://depts.washington.edu/hprc>

Active for Life: Increasing Physical Activity Levels in Adults Age 50 and Older!  
<http://www.activeforlife.info>

**Wisconsin Aging and/or Disability Resource Center  
Prevention Funding Application 2006-2007**

**Budget Request Year I - May 1, 2006 through December 31, 2006**

**1. Personnel: Total Cost \_\_\_\_\_ List Each Position in the Table**

Position Title	FTE	% Time on Project	Salary	Fringe	Prevention Funds

**2. Supplies: Total Cost \_\_\_\_\_ List Supplies and Costs in the Table**

Supplies	Cost

**3. Contractual: Total Cost \_\_\_\_\_ Provide Details in Project Narrative**

**4. All Other Expenses: Total Cost \_\_\_\_\_ Describe Expenses**

Items	Cost

**5. Total Requested Funds for Prevention Project Year I: \_\_\_\_\_**

**Wisconsin Aging and/or Disability Resource Center  
Prevention Funding Application 2006-2007**

**Budget Request Year II - January 1 through December 31, 2007**

**1. Personnel: Total Cost \_\_\_\_\_ List Each Position in the Table**

Position Title	FTE	% Time on Project	Salary	Fringe	Prevention Funds

**2. Supplies: Total Cost \_\_\_\_\_ List Supplies and Costs in the Table**

Supplies	Cost

**3. Contractual: Total Cost \_\_\_\_\_ Provide Details in Project Narrative**

**4. All Other Expenses: Total Cost \_\_\_\_\_ Describe Expenses**

Items	Cost

**5. Total Requested Funds for Prevention Project Year II: \_\_\_\_\_**



# Current and Proposed Aging and Disability Resource Centers April 26, 2005

ADRC 1<sup>st</sup> Generation

ADRC 2<sup>nd</sup> Generation

